SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	B. Received by (Printed Name) D. Is delivery address different from item 1? Yes
1. Article Addressed to:	If YES, enter delivery address below:
John Cummings, Warden Bullock County Correctional Facility PO Box 5107	
Union Springs, AL 36089	3. Service Type XI Certified Mail Registered Insured Mail C.O.D.
D7cv634 C+OP	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7 📗 🗎	L 2760 0005 4873 9112
	stic Return Receipt 102595-02-M-1540